PTO/SB/22 (12-04)
Approved for use through 7/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE pond to a collection of information unless if displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional) 00-VE4.75B CIP								
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)	00-VE4.	/56 CIP							
Application Number 09/767,292	Filed Janu	Filed January 18, 2001							
For METHOD OF AND APPARATUS FOR AUTHENTICATING CONTROL MESSAGES IN A SIGNALING NETWORK									
Art Unit 2135	Examiner P	. W. Klimach							
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.									
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):									
Fee One month (37 CFR 1.17(a)(1)) \$120	Small Entity Fee \$60	\$							
x Two months (37 CFR 1.17(a)(2)) \$450	\$225	\$ 450.00							
Three months (37 CFR 1.17(a)(3)) \$1020	\$510	\$							
Four months (37 CFR 1.17(a)(4)) \$1590	\$795	\$							
Five months (37 CFR 1.17(a)(5)) \$2160	\$1080	\$							
Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. X The Director has already been authorized to charge fees in this X The Director is hereby authorized to charge any fees which may									
The state of the s	r CFR 3.71. d. (Form PTO/SB/96).								
attorney or agent under 37 CFR 1.34.		_							
Registration number if acting under 37 CFR 1.34	32,443	_ ·							
Signature	October 30, 2006 Date								
	Michael J. Strauss (202) 662-0200								
Typed or printed name	Telephone Number								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.									
Total of 1 forms are submitted.									

10/31/2006 JADDO1 00000031 09767292

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450.00 OP

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PTO/SB/17_01-06)
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Under the Papework Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.											
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known								
FEE TRANSMITTAL		, , , , , , , , , , , , , , , , , , , ,		09/767,292							
· · · · · · · · · · · · · · · · · · ·				January 18, 2001							
For FY 2006				Arthur Doskow et al.							
	 -			<u> </u>		P. W. Klimach					
Applicant claims small entity status. See 37 CFR 1.27			Art Unit 2135								
TOTAL AMOUNT OF PAYMENT (\$) 550.00 Attorney Docket No. 00					00-VE04.75B (JIP					
METHOD OF PAYMENT (ch	METHOD OF PAYMENT (check all that apply)										
x Check Credit Card Money Order None Other (please identify):											
Deposit Account Deposit Account Number: 06-2375 Deposit Account Name: Fulbright & Jaworski L.L.P.											
For the above-identified	deposit acc	ount, the Di	rector is	hereby authorize	d to: (chec	k all that apply)					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee											
X Charge any additional fee(s) or underpayment of X Credit any overpayments											
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)											
1. BASIC FILING, SEARCH, AN				<u> </u>			-				
	FILING I			ARCH FEES	EXAMIN	IATION FEES					
Augliostica Toma		nall Entity	E /\$	Small Entity	Fee (\$)	Small Entity Fee (\$)	Eage I	Paid (\$)			
	ee (\$) 300	Fee (\$) 150	Fee (\$) <u>Fee (\$)</u> 250	200	100	1 663 1	alu (Ψ)			
1			100	50	130	65					
2 40.8	200	100									
	200	100	300	150	160	80					
	300	150	500	250	600	300					
	200	100	0	0	0	0		0 115 111			
2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee (\$)											
Fee Description											
Davis claim 6 vo. 26 (crading residue)							100				
Multiple dependent claims	(meraamg	10133403)					360	180			
Total Claims Extra Clain	ns Fee	(\$)	Fee I	Paid (\$)	Mı	ultiple Depende					
40 -38 2	50						Fee Paid (\$)				
HP = highest numer of total claims paid				0.00		-147		_			
Indep. Claims Extra Clain	-		Fee I	Paid (\$)							
2 -2 = 0	x			<u></u>							
HP = highest numer of independent cla	aims paid for,	if greater than	3.								
3. APPLICATION SIZE FEE											
If the specification and drawing	gs exceed 1	00 sheets o	f paper	(excluding electro	onically fil	led sequence or	computer				
listings under 37 CFR 1.52(or small er	ntity) for each ac	Iditional 5	0			
sheets or fraction thereof. S						e	Pa-	Daid (#\			
<u>Total Sheets</u> <u>Extra S</u>				dditional 50 or frac			<u>ree</u>	Paid (\$)			
4. OTHER FEE(S)		·		(lound up to a who	ne number)	^	Fees	Paid (\$)			
Non-English Specification, \$130 fee (no small entity discount)											
Other (e.g., late filing surcharge): Request for Continued Examination and Petition for Two Month Extension of Time \$450.00											
SUBMITTED BY .	111					· · · · · · · · · · · · · · · · · · ·					
Signature \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ノリヘラ	rais	P	Registration No. (Attorney/Agent)	32,443	Telephone	(202) 66	2-0200			